

Self-Exclusion Removal Request

CGCC - 038 (New 02/15)

Type or print (in ink) all information requested on this form.

If additional space is needed, please note response on a separate sheet of paper and attach to this completed form.

SECTION 1: PERSONAL IN	NFORMATION			
Full Legal Name:	Lance	1		
First	Middle	Last		
Other Names (Former Names, such as Maiden	names, Nicknames, or Aliases / A.K.A's.):			
Street	City		State	Zip Code
Succi	City		State	Zip Code
Home Telephone Number	Business Number	Email	Address	
Mailing Address (if different than Ho	ne Address):	1		
Street	City		State	Zip Code
SECTION 2: EXCLUSION				
ffective date of exclusion:				
ECTION 3: DECLARATION				
understand English or have had a	an interpreter read and explain this form			
		(Languag	re)	
I voluntarily seek to re	move myself from the list of self-ex	cluded persons.		
I understand that a gan	nbling establishment is not required	to allow me re-admitta	ance for the	purpose of gambli
at their sole discretion.				
	moval from the list of self-exclude	•	ffective unti	il I have received a
acknowledgement from	n the Department of Justice, Bureau	of Gambling Control.		
	of California, the California Gambli			
-	Gambling and any gambling enterpeirs, executors, administrators, succ		_	
	ling Control Commission, the Bure		•	
•	prise or participating gambling faci	•		
	or equity that I now have, or may h			
<i>C</i> , <i>3</i>	son of, the actions (or gambling los	ses) that may occur upo	on my retur	n to a gambling
stablishment.				
I declare that all	information submitted on or with this s	elf-exclusion removal requ	est form is tr	ue, correct, and comp
i deciaie that an	mornium summer on or with this s	ar excussion removal requ	torin is ti	ac, correct, and comp
Signature			Date	
Print Name				

PRIVACY NOTICE

THE INFORMATION PRACTICES ACT OF 1977 (CIVIL CODE SECTION 1798.17) AND THE FEDERAL PRIVACY ACT (PUBLIC LAW 93-579) REQUIRE THAT THIS NOTICE BE PROVIDED WHEN COLLECTING PERSONAL INFORMATION FROM INDIVIDUALS. INFORMATION REQUESTED ON THIS FORM IS REQUIRED BY THE STATE OF CALIFORNIA, CALIFORNIA GAMBLING CONTROL COMMISSION AND THE DEPARTMENT OF JUSTICE, DIVISION OF LAW ENFORCEMENT, BUREAU OF GAMBLING CONTROL (BUREAU), PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTIONS 19865 AND 19866. THE BUREAU USES THIS INFORMATION TO DETERMINE AN APPLICANT'S SUITABILITY. FAILURE TO PROVIDE MANDATORY INFORMATION MAY RESULT IN THE ABANDONMENT OR DENIAL OF YOUR APPLICATION. PERSONAL INFORMATION SHOULD ONLY BE PROVIDED IN THE SPACES INDICATED. THE BUREAU IS RESPONSIBLE FOR MAINTENANCE OF THE COMPLETED FORM.

IN ADDITION, ANY PERSONAL INFORMATION COLLECTED BY STATE AGENCIES IS SUBJECT TO THE LIMITATIONS IN THE INFORMATION PRACTICES ACT AND STATE POLICY. THE INFORMATION YOU PROVIDE MAY ALSO BE DISCLOSED IN THE FOLLOWING CIRCUMSTANCES: 1) TO ANOTHER GOVERNMENT AGENCY AS REQUIRED BY STATE OR FEDERAL LAW; OR, 2) IN RESPONSE TO A COURT OR ADMINISTRATIVE ORDER, A SUBPOENA, OR A SEARCH WARRANT. PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTION 19821, SUBDIVISION (C), THIS FORM IS EXEMPT FROM THE CALIFORNIA PUBLIC RECORDS ACT.

THE DEPARTMENT OF JUSTICE'S GENERAL POLICY IS AVAILABLE AT: http://oag.ca.gov/privacy-policy. YOU MAY REVIEW THE RECORDS MAINTAINED BY THE BUREAU THAT CONTAIN YOUR PERSONAL INFORMATION, AS PERMITTED BY THE INFORMATION PRACTICES ACT. FOR QUESTIONS REGARDING THIS NOTICE OR ACCESS TO YOUR RECORDS, YOU MAY CONTACT THE BUREAU AT (916) 227-3584.